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COVER LETTER

| Division of Cor | porations | | |
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| | US | Realty, LLC | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | | Charles Hilty | |
| | | Name of Person | |
| | | U S Realty, LLC | |
| | | Firm/Company | , |
| | | P.O. Box 1636 | |
| | | Address | |
| | Po | nte Vedra Beach, Florida 3200 | 4 |
| | | City/State and Zip Code | |
| | | crhilty@gmail.com | |
| | | to be used for future annual report | notification) |
| For further information c | concerning this matter, please c | all: | |
| Char | les Hilty | 904 | 806-3011 |
| Name o | of Person | at () Area Code Da | ytime Telephone Number |
| Enclosed is a check for the | he following amount: | | |
| ■ \$25.00 Filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed) | □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAII | INC AIMBECC. | STD FFT/FO | HDTED ANNOTES. |

MAILING ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | U S Realty, LLC | | |
|---|---|------------------------------------|---------------------------------------|
| (Name of the Limited (A | Liability Company as it now ap Florida Limited Liability Compa | pears on our records.) ny) | |
| The Articles of Organization for this Limited Liab Elorida document number | ility Company were filed or | March 3, 2015 | and assigned |
| This amendment is submitted to amend the follow | ing: | | |
| A. If amending name, enter the new name of the | | | |
| The new name must be distinguishable and contain the word | Is "Limited Liability Company," | the designation "LLC" or the abbre | eviation a. L. C. |
| Enter new principal offices address, if applicab | 3948 3rd St | reet South | - 1 L E |
| (Principal office address MUST BE A STREET) | ADDRESS) Suite 325 | | |
| | Jacksonville | e Beach, Florida 32250 | |
| Enter new mailing address, if applicable: | P.O. Box 16 | 536 | ED 25 |
| (Mailing address MAY BE A POST OFFICE BO | Ponte Vedra | a Beach, Florida 32004 | · · · · · · · · · · · · · · · · · · · |
| B. If amending the registered agent and/or registered agent and/or the new registered offic Name of New Registered Agent: | | on our records, enter th | ne name of the new |
| New Registered Office Address: | 3948 3rd Street South Suite | 325 | |
| | Enter Jacksonville Beach | Florida street address | an. |
| | City | , Florida | Zip Code |
| | | | |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|------------------|--|--|
| MGR | Wallace R Devlin | 3948 3rd Street South Suite 325 TACK SONVINE BEACH, FL 32250 | = Add |
| | | | Remove |
| | | | Change |
| MGR | Brian E. Wyka | 5208 Manorwood Dr., 3D BULDING Z, SARASOTA, FL 3423 | <mark>\$5</mark> □ ∧ád |
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| ffective date, if other than the dat | e of filing: | (opt | ional) |
| an effective date is listed, the date must be a lote: If the date inserted in this block ocument's effective date on the Depar | loes not meet the applicable statut | ory filing requirements, th | is date will not be listed as the |
| e record specifies a delayed ef The 90th day after the record | | ective time, at 12:01 | a.m. on the earlier of: |
| September 28, 2017 ated | 12:01 a.m. | | |
| | enture of a member or authorized repre | W.L | |
| | | 14/200 | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00